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## APPLICANTS

Klas C. Haglid, Wilmington, DE;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/188,729 11/09/1998 PAT 6,176,305  
 and is a CIP of 09/579,739 05/26/2000 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/25/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY DE	SHEETS DRAWING 3	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

031013  
 KRAMER LEVIN NAFTALIS & FRANKEL LLP  
 INTELLECTUAL PROPERTY DEPARTMENT  
 1177 AVENUE OF THE AMERICAS  
 NEW YORK, NY  
 10036

## TITLE

Ventilating system, heat exchanger and methods

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 599		<input type="checkbox"/> 1.16 Fees ( Filing )
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